RAFIQUI H.J SHAHEED ROAD TEL: 021-35223811-15, Ext-332, website: www.jsmu.edu.pk

Ref No: JSMU/EXAM/DPT/ 9361 /10-25

DATE: 01-10-2025

PRACTICAL/VIVA ROSTER DOCTOR OF PHYSICAL THERAPY (DPT) BATCH-IV SEMESTER-VII REGULAR & YEAR BACK EXAMINATIONS

| | PRACTICAL/VIVA | EXAM TIMING |
|------------------------|-------------------------------------|----------------------|
| TUESDAY 07-10-2025 | RADIOLOGY & DIAGNOSTIC IMAGING | FIRST SHIFT |
| THURSDAY 09-10-2025 | EVIDENCE BASED PRACTICE | 09:00 AM TO 10:45 AM |
| SATURDAY 11-10-2025 | MUSCULOSKELETAL PHYSICAL THERAPY | SECOND SHIFT |
| TUESDAY 14-10-2025 | SUPERVISED CLINICAL PRACTICE | 11:00 AM TO 12:45 PM |

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|-----|-------|------|-----|
| | _ | | |

976084 976085

| TIZET | | | | | | | | |
|----------------------------|----------------------------|----------------------------|------------------|------------------|------------------|------------------|---------------|--|
| ROLL NO# | | | | | | | No. of St. | VENUE |
| 976002 976012 976024 | 976004 976013 976025 | 976005 976014 976026 | 976006 976017 | 976008 976019 | 976009 976020 | 976010 976021 | 17 | 7th FLOOR ROOM-I NEW DENTAL BUILDING |
| ROLL NO# | | | | | 100 | | No. of St. | VENUE |
| 976027 976035 976044 | 976028 976036 976045 | 976029 976039 976046 | 976030 976040 | 976031 976041 | 976032 976042 | 976034 976043 | 17 | 7th FLOOR ROOM-II NEW DENTAL BUILDING |
| ROLL NO # | | | a e los | | | | No. of St. | VENUE |
| 976049 976058 976065 | 976051 976059 976066 | 976052 976060 976067 | 976053 976061 | 976054 976062 | 976055 976063 | 976057 976064 | 17 | 7 th FLOOR ROOM-III NEW DENTAL BUILDING |
| ROLL NO # | | | | | | | No. of St. | VENUE |
| 976068 976076 | 976069 976077 | 976070 976078 | 976071 976079 | 976072 976081 | 976073 976082 | 976075 976083 | 17 | 1st FLOOR PATHO MICRO LAB |

Prepared By _____ Checked By ____

976087

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SMC BUILDING

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PRACTICAL/VIVA ROSTER DOCTOR OF PHYSICAL THERAPY (DPT) BATCH-IV SEMESTER-VII REGULAR & YEAR BACK EXAMINATIONS

| ROLL NO # | | | | | | | No. of St. | VENUE |
|-----------|--------|--------|--------|--------|--------|--------|---------------|---------------------------------|
| 976088 | 976089 | 976090 | 976092 | 976093 | 976094 | 976095 | | 2 nd FLOOR PHARMA |
| 976096 | 976098 | 976099 | 976100 | 976107 | 976110 | 976112 | 17 | SEMINARROOM-II |
| 976205 | 976209 | 976222 | | | | | | SMC BUILDING |

| 3 2 | \sim | | | | 11:01 |
|-----|--------|-----|--|---|-------|
| | | • 1 | | 7 | |

| ROLL NO # | | | | | | | No. of St. | VENUE |
|-----------|--------|--------|--|--|--|------------------|---------------|--|
| | | | | | | 976233 976301 | 17 | 7th FLOOR ROOM-I NEW DENTAL BUILDING |
| 976302 | 976303 | 976304 | | | | | | Боприна |

| ROLL NO# | | | | | No. of St. | VENUE |
|------------------|--------|--------|--|--|------------|---|
| 976307 976321 | | | | | 1 200 0 | 7th FLOOR ROOM-II NEW DENTAL BUILDING |
| 976412 | 976413 | 976416 | | | | |

| ROLL NO# | | | | | No. of St. | VENUE |
|----------------------------|--------|--------|--------|--|---------------|--|
| 976417 976427 976611 | 976428 | 976429 | 976601 | | | 7 th FLOOR ROOM-III NEW DENTAL BUILDING |

| ROLL NO # | | | | | | No. of St. | VENUE |
|------------------|------------------|--------|--------|--------|--------|---------------|------------------------------|
| 976615 | | | | | | | 1st FLOOR PATHO MICRO LAB |
| 976653 976662 | 976654 976663 | 976657 | 9/6658 | 976659 | 976660 | 1/ | SMC BUILDING |

| ROLL NO # | | | 0.030 | | No. of St. | VENUE |
|------------------|------------------|--------|--------|--------|---------------|--|
| 977210 978339 | 977321 978340 | 979211 | 978250 | 976022 | | 2 nd FLOOR PHARMA SEMINAR ROOM-II SMC BUILDING |

Prepared By _____ Checked By _____

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PRACTICAL/VIVA ROSTER DOCTOR OF PHYSICAL THERAPY (DPT) BATCH-IV SEMESTER-VII REGULAR & YEAR BACK EXAMINATIONS

| ROLL NO # | YEAR BAC | K STUDENTS SECOND SHIFT | No. of St. | VENUE |
|-----------|----------|-------------------------|---------------|--|
| 978236 | 977309 | EVIDENCE BASED PRACTICE | 02 | 1st FLOOR PATHO MICRO LAB SMC BUILDING |

Copy for information:

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- 2. Registrar Office
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Dr. Khatija Khan

Deputy Controller Of Examinations
Jinnah Sindh Medical University

Prof. Dr. Fauzia ImtiazController of Examinations

Jinnah Sindh Medical University

Prepared By ______ Checked By _____

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